PERMIT APPLICATION (NOT A PERMIT)

Department of Parks, Recreation and Human Services Bureau of Parks and Recreation 400 Dewey Avenue Rochester, NY 14613 585-428-6755

THIS APPLICATION WILL NOT BE ACCEPTED UNLESS IT IS SIGNED AND WITNESSED BY A NOTARY PUBLIC OR COMMISSIONER OF DEEDS AND THE \$10.00 PROCESSING FEE IS ATTACHED.

FOR OFFICE USE ONLY:						
Fee						
Paid (Receipt #)	()					
Balance						
Ca ailita / Diva ata v						
Facility Director						
Master List						
Proof of ID						
Permit Number						
Revised 8/20/2002						

FACILITY REQUESTED		ACTIVITY			
DAY OF WEEK DATE		HOURS			
(use additional sheet if more than one day)		_110013	FROM		ТО
ESTIMATED # OF PARTICIPANTS / SPECTATORS					
	PHONE	())
RESPONSIBLE PERSON (Must be on site during permit hours)			WORK		HOME
ORGANIZATION (if applicable)					
APPLICANT'S ADDRESS	CITY	_	STATE		ZIP CODE
E-MAIL ADDRESS		WEBSITE ADDRESS			
AREA I	REQUESTED				
Athletic Fields (be specific) Conference/Meeting Room		Gym Ice Rink			
Danforth Auditorium/Kitchen		Pool			
Gazebo, Lunsford		Restrooms		<i>(</i> =	
Gazebo, Maplewood Large Gazebo, Maplewood Small		Stardust Ballroom/Kitchen (Edgerton only) Other (please be specific)			
<u></u>		"		ŕ	
SPECIAL NEEDS Are you requesting permission to serve alcoholic beverages (beer and win	e only)?	Circle One: Yes No			
Are you requesting permission to serve alcoholic beverages (beer and with	C Offig):		Yes	No	
Are you requesting permission to vend food items?			Yes	No	
Do you think your event is one of the following: Festival, Block Party, Parade, Walk or Race? Are you charging an entrance fee?			Yes Yes	No No	
DESCRIBE SUPERVISION/SECURITY TO BE PROVIDED BY PERMITI	EE (attach security	contract and	d insurance	certificate	upon request)
Release and Inde	emnification Certific	cate			
In consideration of the use of certain facilities owned by the City of Roches					
I, and my guests, hereby release said					
liability, loss, attorney's fees or other expense whatsoever, resulting from p my guests arising out of the use of such facilities on the date(s) specified h					
I hereby further agree to indemnify and to save harmless said City from an	y and all liability, loss	s, attorney's fe	es or other		
negligence or intentional misconduct or that of my guests, employees or a	gents during the use	of the facilitie	S.		
Applicant's Signature	<u> </u>	Date			
Sworn before me this day of	f	, 20			
·					
Notary Public/Commissioner of Deeds	Expiration	Date			